

QUESTIONS

How much does ELNEC Cost?

ELNEC is \$40.00 for UAB Employees and \$125 for Non-UAB Employees.

What does the cost of ELNEC include?

The cost of ELNEC includes contact hours, handouts, and meals.

Where do I mail/fax my payment to?

Erica Lumpkin
176 F STE 7208
619 19th Street South
Birmingham, Alabama 35249-6922
Fax number: 996-4972

How many approved hours is ELNEC?

Day one has been approved for 6.3 ABN/5.25 ANCC hours. Day two has been approved for 6.0 ABN/5.0 ANCC hours.

How will I obtain credit for my attendance?

Credit will be given separately for each day. Partial credit will not be given. You must attend the entire day to obtain credit. Alabama nurses will need to scan their nursing licenses to obtain credit.

If I can't attend, can I receive a refund?

No refunds will be given after July 5, 2013.

UAB Hospital's Nursing Continuing Education Department is an approved provider of continuing nursing education by the Alabama Board of Nursing (Provider Number: ABNP0055, Expiration date: June 4, 2013). UAB Hospital's department of Nursing Education and Professional Development is an approved provider of continuing nursing education by The Alabama State Nurses Association, and accredited approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation (Provider Number: 5-69, Expiration date: December 10, 2013).

ADDITIONAL QUESTIONS

CONTACT

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END OF LIFE NURSING EDUCATION CONSORTIUM

JULY 18-19, 2013

**UAB HOSPITAL
MARGARET CAMERON SPAIN
AUDITORIUM
615 18TH STREET SOUTH
BIRMINGHAM, ALABAMA 35202**

AGENDA-DAY ONE JULY 18, 2013

| | |
|-----------|--|
| 0800-0830 | Registration and Breakfast |
| 0830-0845 | Welcome and Overview of Sessions |
| 0845-1000 | Module 1: Palliative Nursing Care |
| 1000-1015 | Break |
| 1015-1130 | Module 2: Pain Management |
| 1130-1230 | Lunch |
| 1230-1345 | Module 3: Symptom Management |
| 1345-1400 | Break |
| 1400-1530 | Module 4: Ethical Issues in Palliative Care Nursing |
| 1530-1545 | Summary and Evaluation |

AGENDA-DAY TWO JULY 19, 2013

| | |
|-----------|--|
| 0800-0830 | Registration and Breakfast |
| 0830-0945 | Module 5: Cultural Considerations in End-of-Life Care |
| 0945-1000 | Break |
| 1000-1115 | Module 6: Communication |
| 1115-1215 | Lunch |
| 1215-1330 | Module 7: Loss, Grief, and Bereavement |
| 1330-1345 | Break |
| 1345-1500 | Module 8: Final Hours |
| 1500-1515 | Summary and Evaluation |

PLEASE NOTE:

Module dates and times may change based on speaker availability.

REGISTRATION FORM

Name _____

Title _____

Employer _____

Address _____

Phone _____

Email address _____

PAYMENT INFORMATION

Payments may be made as a check, money order, or credit card.

Credit card type: ____ Visa ____ Mastercard

Name on card: _____

Card number: _____

Please include code on back of card _____

Expiration Date _____

Signature: _____